

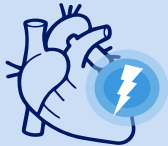
# Why is the SELECT trial being conducted?



**Few medical treatments** for long-term overweight and obesity management **are currently available** and **none are indicated to reduce CV risk**<sup>1</sup>



During the last 30 years, the prevalence of **obesity** has reached **epidemic** proportions<sup>2</sup>



**Individuals with overweight or obesity are at high risk of developing CVD**, and this is a predominant cause of death in this group<sup>3</sup>



Despite improvements in SoC therapies\*, residual risk remains and **CVD resulted in ~17.9 million deaths globally in 2019**<sup>4</sup>



There is currently **no data** investigating whether semaglutide s.c. 2.4 mg OW lowers the incidence of MACE vs placebo in people **with obesity without T2D**

\*Such as anti-hypertensive and lipid lowering drugs. CV, cardiovascular, CVD, cardiovascular disease; SELECT, semaglutide effects on cardiovascular outcomes in people with overweight or obesity; SoC, standard of care.  
1. Ebbert JO et al. Curr Atheroscler Rep 2014;16:445. 2. GBD 2015 Obesity Collaborators N Engl J Med. 2017;377:13-27; 3. GBD 2015 Obesity Collaborators N Engl J Med 2017;377:13-27; 4. WHO, Cardiovascular diseases <https://www.who.int/en/news-room/fact-sheets/detail/cardiovascular-diseases-cvds>. Accessed September 2022.